

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Assisted Living Federation of America

ADDRESS (number and street) ▼

1650 King Street

Suite 602

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00338020

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☒ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

08

01

2015

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

08

31

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms Maribeth Bersani

Signature of Treasurer

Ms Maribeth Bersani

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

09

16

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Assisted Living Federation of America

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 08 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y 08 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		595995.93
(b) Cash on Hand at Beginning of Reporting Period.....	545016.73	
(c) Total Receipts (from Line 19)	20460.36	113229.04
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	565477.09	709224.97
7. Total Disbursements (from Line 31)	553.86	144500.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	564923.23	564724.96
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Assisted Living Federation of America

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 08 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 08 / 31 / 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

17860.36

100909.04

(ii) Unitemized

2600.00

7630.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

20460.36

108479.04

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

5000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

20460.36

113479.04

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

-250.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20460.36

113229.04

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

20460.36

113229.04

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	553.86	26787.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	553.86	26787.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	35000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	82712.50
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	553.86	144500.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	553.86	144500.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20460.36	113479.04
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20460.36	113479.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	553.86	26787.51
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	553.86	26787.51

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. James Balda

Mailing Address 1650 King St
Ste 602

City State Zip Code
Alexandria VA 22314-2747

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALFA

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3260.85

Date of Receipt

08 / 03 / 2015

Transaction ID : C3085933

Amount of Each Receipt this Period

217.39

Full Name (Last, First, Middle Initial)

B. James Balda

Mailing Address 1650 King St
Ste 602

City State Zip Code
Alexandria VA 22314-2747

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALFA

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3260.85

Date of Receipt

08 / 15 / 2015

Transaction ID : C3094933

Amount of Each Receipt this Period

217.39

Full Name (Last, First, Middle Initial)

C. James Balda

Mailing Address 1650 King St
Ste 602

City State Zip Code
Alexandria VA 22314-2747

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALFA

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3260.85

Date of Receipt

08 / 31 / 2015

Transaction ID : C3085934

Amount of Each Receipt this Period

217.39

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

652.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. Maribeth Bersani

Mailing Address 320 S West St
Apt 404

City State Zip Code
Alexandria VA 22314-5943

FEC ID number of contributing
federal political committee.

C

Name of Employer
Assisted Living Federation of America

Occupation
Vp Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.19

Date of Receipt

08 / 03 / 2015

Transaction ID : C3094934

Amount of Each Receipt this Period

272.73

Full Name (Last, First, Middle Initial)

B. Maribeth Bersani

Mailing Address 320 S West St
Apt 404

City State Zip Code
Alexandria VA 22314-5943

FEC ID number of contributing
federal political committee.

C

Name of Employer
Assisted Living Federation of America

Occupation
Vp Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.19

Date of Receipt

08 / 14 / 2015

Transaction ID : C3085944

Amount of Each Receipt this Period

272.73

Full Name (Last, First, Middle Initial)

C. Maribeth Bersani

Mailing Address 320 S West St
Apt 404

City State Zip Code
Alexandria VA 22314-5943

FEC ID number of contributing
federal political committee.

C

Name of Employer
Assisted Living Federation of America

Occupation
Vp Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.19

Date of Receipt

08 / 30 / 2015

Transaction ID : C3085945

Amount of Each Receipt this Period

272.73

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

818.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. Beth Burbage

Mailing Address 116 Hedge Bloom

City State Zip Code
Irvine CA 92618-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Silverado-N/A

Occupation

Vice President, OD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 13 / 2015

Transaction ID : C3071146

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Paul Chapman

Mailing Address 2121 Brentwood Dr

City State Zip Code
Houston TX 77019-3511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Belmont Village

Occupation

EVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 11 / 2015

Transaction ID : C3069099

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Brian Cleveland

Mailing Address 400 S. Waiola Avenue

City State Zip Code
La Grange IL 60525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vi Living

Occupation

VP of IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2015

Transaction ID : C3085112

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1900.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. NANCY CONVERTITO

Mailing Address 209 Brangus Rd

City

Cedar Park

State

TX

Zip Code

78613-7816

FEC ID number of contributing
federal political committee.

C

Name of Employer

SILVERADO-N/A

Occupation

NAT'L DIR, SALES TRAINING

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	2		2	0	1	5		

Transaction ID : C3070355

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Brian Danaher

Mailing Address 18 Thomas St

City

Quincy

State

MA

Zip Code

02169-3519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Benchmark Senior Living

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	2		2	0	1	5		

Transaction ID : C3070357

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C. Allison Guthertz

Mailing Address 492 Beacon St

Unit 15

City

Boston

State

MA

Zip Code

02115-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Benchmark Senior Living-Corporate Offi

Occupation

VP, Quality Resident Services

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	2		2	0	1	5		

Transaction ID : C3069645

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. Stephanie Handelson

Mailing Address 257 Northampton St
Unit 606

City State Zip Code
Boston MA 02118-1284

FEC ID number of contributing
federal political committee.

C

Name of Employer

Benchmark Senior Living-N/A

Occupation

President and COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2015

Transaction ID : C3070037

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Guy Hemond

Mailing Address 8 Park Lane Ave

City State Zip Code
Milford MA 01757-2024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Benchmark Senior Living-N/a

Occupation

VP - Dining Experience and Facilities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : C3071086

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C. Thomas Masiello

Mailing Address 3 Grantland Rd

City State Zip Code
Wellesley MA 02481-7606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Benchmark Senior Living-N/A

Occupation

VP Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : C3070719

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. Cary Maslow

Mailing Address 2229 Donegal Dr

City
Darien

State
IL

Zip Code
60561-8461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vi Living

Occupation

VP of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2015

Transaction ID : C3085104

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. William Sciortino

Mailing Address 2224 Iroquois Rd

City
Wilmette

State
IL

Zip Code
60091-1408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vi-N/A

Occupation

Sr. VP of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

08 / 25 / 2015

Transaction ID : C3081261

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Margaret Scott

Mailing Address 10 S Briar Hollow Ln
Unit 95

City
Houston

State
TX

Zip Code
77027-2891

FEC ID number of contributing
federal political committee.

C

Name of Employer

Belmont Village

Occupation

EVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 11 / 2015

Transaction ID : C3069098

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 13
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. Donald Thompson

Mailing Address 3 Marsh Creek Rd

City

Amelia Island

State

FL

Zip Code

32034-6413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Senior Living Communities, LLC

Occupation

CEO

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : C3085119

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Michael ZusmanMailing Address 6160 Peachtree Dunwoody Rd
Bldg C

City

Atlanta

State

GA

Zip Code

30328-6068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kwalu

Occupation

CEO

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2015

Transaction ID : C3081708

Amount of Each Receipt this Period

2440.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

5440.00

TOTAL This Period (last page this line number only)..... ►

17860.36

